

Plan Selection for Active Employees and Pre-65 Former Employees

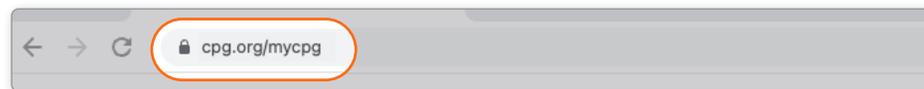
These instructions will guide you through CPG's online application as you make your plan selection(s) for the coming year through [MyCPG Accounts](#).

Annual Enrollment PLUS! Introducing Delta Dental, our new dental carrier

If you are currently enrolled in a Cigna Dental plan through The Episcopal Church Medical Trust (Medical Trust), *that coverage is going away*. **You must select a Delta Dental PPO + Premier™ (Delta Dental) plan during Annual Enrollment** or you will not have dental coverage through the Medical Trust in 2024. Learn about our new vendor, [Delta Dental](#), and the [Delta Dental PPO + Premier plan](#).

Step One: Log in

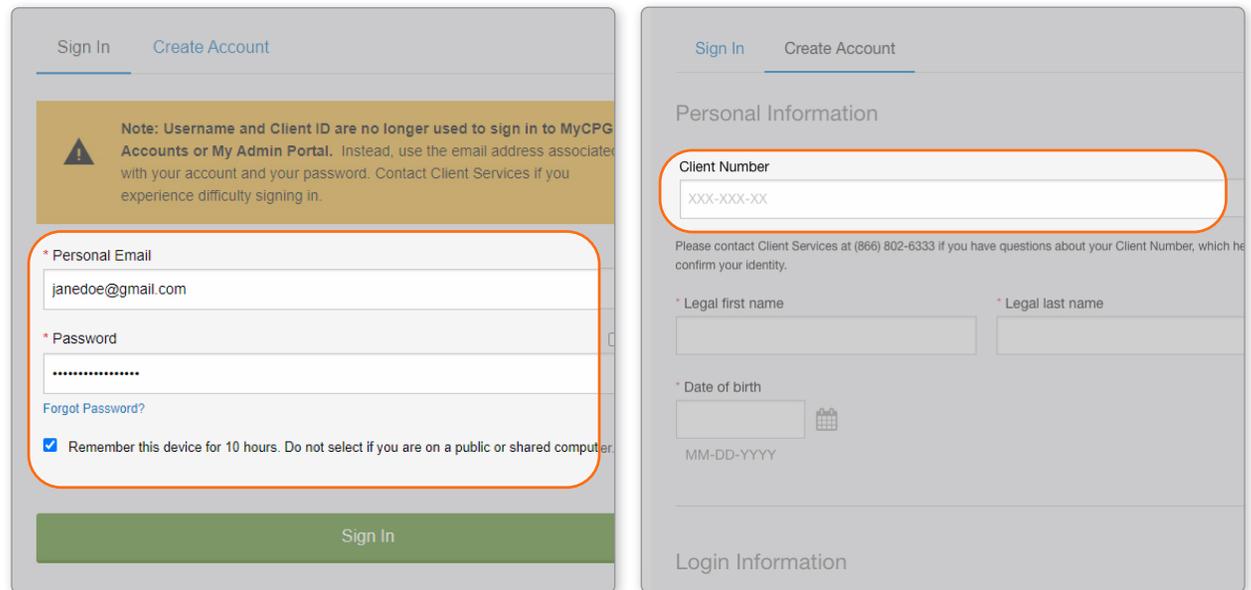
1 Go to cpg.org/mycpg.



2 Sign in with the email address on your Annual Enrollment letter in the green envelope. You may need to update your password to meet new security standards.

3 If there is no email address or you did not access your account in 2022 or later, please select **Create Account** and follow the prompts.

Enter your Client Number, found on your Annual Enrollment letter. The number can make it easier to verify you during the account set-up process.

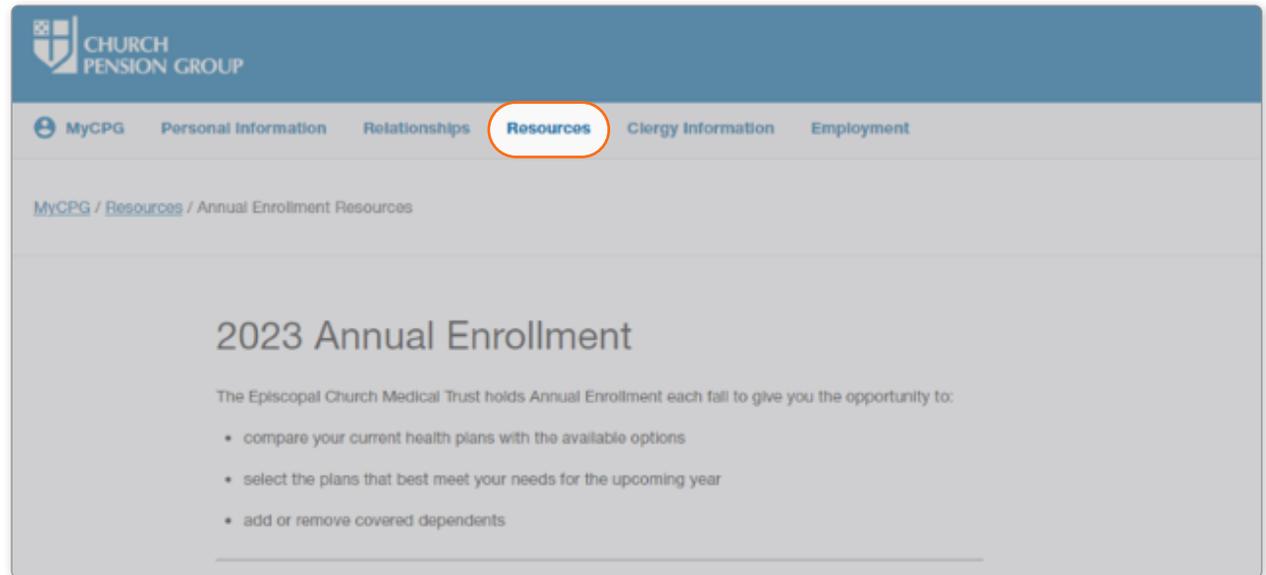


The image shows two screenshots of the MyCPG Accounts website. The left screenshot shows the 'Sign In' page with a note: 'Note: Username and Client ID are no longer used to sign in to MyCPG Accounts or My Admin Portal. Instead, use the email address associated with your account and your password. Contact Client Services if you experience difficulty signing in.' Below the note are fields for 'Personal Email' (containing 'janedoe@gmail.com') and 'Password'. There is a 'Forgot Password?' link and a checkbox for 'Remember this device for 10 hours. Do not select if you are on a public or shared computer.' A green 'Sign In' button is at the bottom. The right screenshot shows the 'Create Account' page with a 'Personal Information' section. It has a 'Client Number' field (containing 'xxx-xxx-xx'), a note to contact Client Services at (866) 802-6333, and fields for 'Legal first name', 'Legal last name', and 'Date of birth' (with a calendar icon and 'MM-DD-YYYY' format). A 'Login Information' section is partially visible at the bottom.

Need enrollment technical assistance? Call our Client Services Technical Support Team at 855-594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET.

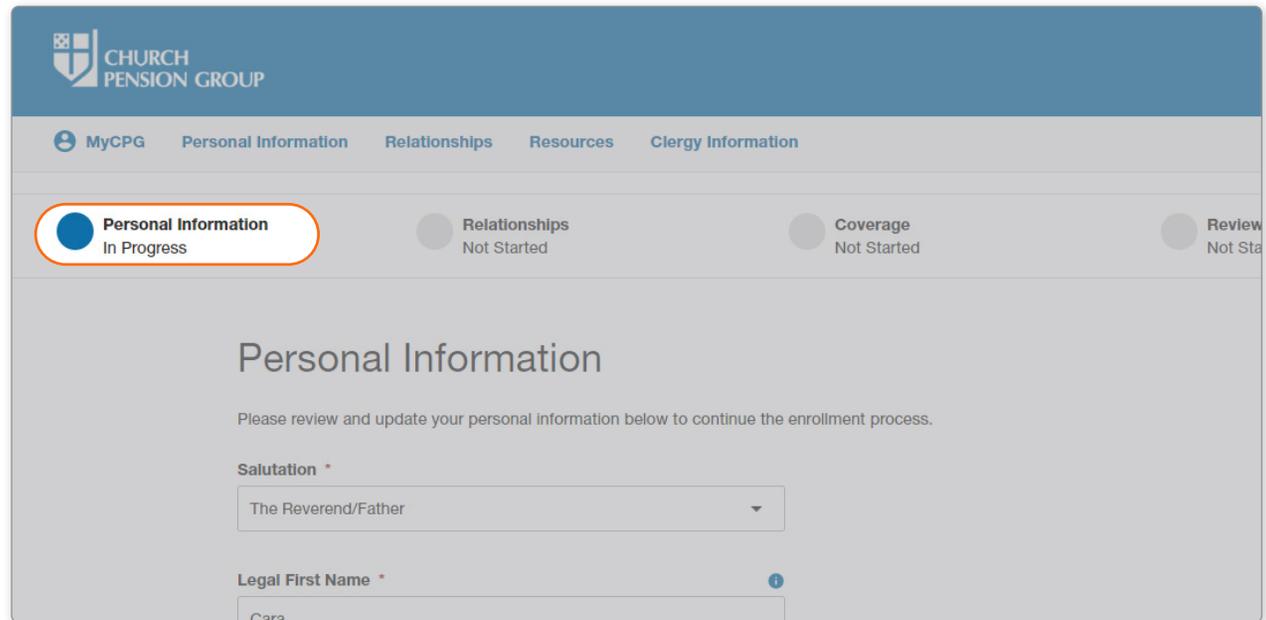
Step Two: Enroll

Click on the Annual Enrollment banner, or go to **Resources** tab and click the **Annual Enrollment Resources** quick action button.



Step Three: Update your personal information

Verify your Personal Information and make changes directly to the online form.



Step Four: Update Your Relationships Information

- 1 Make sure your spousal and dependent(s) information is current by making updates on the **Relationships** screen.
Update current spousal and dependent information by clicking on the **Edit** link under their name(s).
- 2 Add a new spouse or dependent only if you intend to provide them with health plan coverage.¹
Add a new spouse by clicking the **Marital Status Section** link.
- 3 Add a new dependent by clicking on the **Add Dependent** button.

CHURCH PENSION GROUP

MyCPG Personal Information Relationships Resources

Personal Information Completed Relationships In Progress Coverage Not Started Review Not Started

Relationships

Marital History

Spouse
There is no current spousal information on record.
To update marital status or spouse's information, please visit the [Marital Status Section](#).

Dependents

There are no dependents on record. Click the button below to add a dependent.

[Add Dependent](#)

Previous [Save & Continue to Coverage](#)

Support and Guidance

- Purpose of this screen
- Adding or updating dependents
- Adding or updating domestic partners
- Adding or updating marital information
- Definition of relationship types

¹The following information is required for adding a new dependent (spouse or child): legal name, gender, date of birth, and Social Security Number or Individual Tax ID Number.

CHURCH PENSION GROUP MyCPG

MyCPG Personal Information Relationships Resources

SDioadmintestingone
Client Number: XXX-X06-56

Personal Information Completed
 Relationships Completed
 Coverage In Progress
 Review Not Started

Coverage

If you want to make changes to your participants or your plans please select from options below. If you want to stay with your current plan, no changes are required.

Current Plan

Medical Plan
Anthem BCBS BlueCard PPO 100
Self + Child

Dental Plan
Aetna Freedom Choice Dent
Self + Child

Annual Enrollment Options

Plan Reference Documents

- [Annual Enrollment \(AE\) Guide](#)
- [Plan Comparison Chart](#)

Participant Selection

Please select each person to be covered in the plans below. Dependents not selected will not have coverage. For the purposes of your annual enrollment dependent eligibility is based on coverage eligibility as of January 1 of the coming plan year.

Medical Coverage

- Self
- Cara Walsh
Spouse
- Rj Smith
Child

Dental Coverage

- Self
- Cara Walsh
Spouse
- Rj Smith
Child

On the **Coverage** screen, your current health plan(s) will be displayed. Review your coverage.

1
Select who you want to have covered under your health plan(s).

2
For Medical Coverage
Check the **Medical Coverage** boxes in front of dependents' names if they are to receive coverage or uncheck the boxes to discontinue coverage for the new plan year.

For Dental Coverage
For **Dental Coverage** boxes, select your Delta Dental PPO + Premier plan and check the boxes in front of dependents' names if you wish to enroll them in coverage for the new plan year.

Consider your plan choices and their rates and then make your plan selection(s).

Step Five: Make Your Health Plan Selections (cont'd)

Plan Selection

Please review the available medical and dental coverage options below. If you wish to make a change use the radio buttons to make your selection. Monthly Premium ⓘ

Medical Plans	Single	Self + 1	Family
<input checked="" type="radio"/> Cigna Open Access Plus CDHP-40/HSA Plan Summary	\$820.00	\$1,476.00	\$2,296.00
<input type="radio"/> Cigna Open Access Plus CDHP-15/HSA Plan Summary	\$981.00	\$1,766.00	\$2,747.00
<input type="radio"/> Cigna Open Access Plus PPO 100 Plan Summary	\$1,295.00	\$2,331.00	\$3,626.00
<input type="radio"/> Cigna Open Access Plus PPO 90 Plan Summary	\$1,161.00	\$2,090.00	\$3,251.00
<input type="radio"/> Cigna Open Access Plus PPO 80 Plan Summary	\$1,054.00	\$1,897.00	\$2,951.00
<input type="radio"/> Cigna Open Access Plus PPO 70 Plan Summary	\$961.00	\$1,730.00	\$2,691.00
<input type="radio"/> Cigna Open Access Plus MSP PPO 100 Plan Summary	\$1,034.00	\$1,861.00	\$2,895.00
<input type="radio"/> Cigna Open Access Plus MSP PPO 90 Plan Summary	\$930.00	\$1,674.00	\$2,604.00
<input type="radio"/> Cigna Open Access Plus MSP PPO 80 Plan Summary	\$842.00	\$1,516.00	\$2,358.00

Dental Plans	Single	Self + 1	Family
<input checked="" type="radio"/> Dent&Ortho-25/75 Plan Summary	\$89.00	\$160.00	\$249.00
<input type="radio"/> Basic Dent-50/150 Plan Summary	\$71.00	\$128.00	\$199.00
<input type="radio"/> Preventive Dental Plan Summary	\$43.00	\$77.00	\$120.00
<input type="radio"/> Decline Dental Coverage			

Summary

Monthly Cost ⓘ

Medical	\$2,331.00
Dental	\$42.00
Total	\$2,373.00

[Previous](#) [Continue to Review](#)

3 Remember that if you are currently enrolled in a Cigna Dental plan through the Medical Trust, that coverage is going away. **You must select a Delta Dental plan option during Annual Enrollment** or you will not have dental coverage through the Medical Trust in 2024.

If you do not want medical and/or dental coverage through the Medical Trust in 2024, check **Decline Medical Coverage** and/or **Decline Dental Coverage**.

Step Six: Review and Confirm Your Coverage

CHURCH PENSION GROUP MyCPG

MyCPG Personal Information Relationships Resources

Personal Information Completed Relationships Completed Coverage Pending Submission **Review In Progress**

Review

Please review all of your personal information, participant and plan selections carefully before submitting.

[Personal Information](#) [Edit](#)

Support and Guidance

- [Purpose of this screen](#)
- [Submit or update](#)
- [Post-Retirement Health Subsidy](#)

1 When you are done, make a final review of your selected health plan choice(s).

2 Then sign the form electronically by checking the box at the end of the form and click **Submit**.

Follow the instructions to conclude the review of your plan selection process:

If a red error message appears, correct the error, and click **Submit** again.

(1) I confirm the elections indicated above are accurate and agree to be bound by the terms of the Medical Trust's benefit plan(s) and the terms on which my employer has elected to participate in them, (2) I understand that my elections will remain in effect for the plan year and may be changed only due to a change of status, and (3) I certify that the information I have provided is true, complete and accurate.

[Previous](#) [Submit](#)

After submitting you will receive confirmation of your plan coverage.

MyCPG Personal Information Relationships Resources

Cara Sachiko Abbott
Client Number: XXX-X11-14

Confirmation

Thank you! Your Annual Enrollment selections were received on Fri, Sep 2, 2022, 10:19 AM (US Eastern Time). Please download and save a copy of the summary of benefits & coverage for the plan(s) you selected, and plan election confirmation below.

- [Medical Plan Summary of Benefits and Coverage](#)
- [Dental Plan Summary of Benefits and Coverage](#)
- [Enrollment Transmission Confirmation](#)

[Health Plan Vendor Contact Information](#)

Plan Details

Medical Coverage
✓ Self

Dental Coverage
✓ Self

Medical Plan
Group Medicare Advantage Premium (PPO)
Single
\$252.78

Dental Plan
Dent&Ortho-25/75
Single
\$90.00

Support and Guidance

- [Purpose of this screen](#)
- [Consumer-Directed Health Plans and Health Savings Accounts](#)
- [Speak with a CPG Financial Education Specialist](#)
- [Health plan vendor contact information](#)

[Start Over](#) [MyCPG Home](#)

3 To reject all changes and restart with the original form, select **Start Over**.

A message will ask if you are sure. Click **Start Over** to continue or **Cancel** to keep your previously submitted selection(s).

For enrollment technical assistance, please call our Client Services Technical Support Team at 855-594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET.

Refer to These Benefit Resources For dental and additional benefits offered through the Medical Trust:

- Visit [cpg.org/annualenrollment](https://www.cpg.org/annualenrollment) and select your status.
 - “I’m an Active Employee” (currently working)
 - “I’m a Pre-65 Former Employee” (not eligible for Medicare)

Your plan provides a Summary of Benefits and Coverage (SBC) which offers important details about the plan’s benefits in a standard format to help you compare options.

- SBCs are available at [cpg.org/mtdocs](https://www.cpg.org/mtdocs).
- For a free paper copy, call (800) 480-9967, Monday through Friday, 8:30 AM to 8:00 PM ET.

For help choosing the best plans for you and your dependents:

- Medical—Contact a Health Advocate representative for assistance at 866-695-8622 or answers@HealthAdvocate.com.
- Dental—View [cpg.org/deltadental](https://www.cpg.org/deltadental) to learn more about Delta Dental PPO + Premier™ plans, or call Delta Dental at 888-894-7059.

Need help with Annual Enrollment? Call Client Services at 800-480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET.

This material is provided for informational purposes only and should not be viewed as investment, tax, or other advice. It does not constitute a contract or an offer for any products or services. In the event of a conflict between this material and the official plan documents or insurance policies, any official plan documents or insurance policies will govern. The Church Pension Fund (“CPF”) and its affiliates (collectively, “CPG”) retain the right to amend, terminate, or modify the terms of any benefit plan and/or insurance policy described in this material at any time, for any reason, and, unless otherwise required by applicable law, without notice.

Church Pension Group Services Corporation (“CPGSC”), doing business as The Episcopal Church Medical Trust, maintains a series of health and welfare plans (the “Plans”) for eligible employees (and their eligible dependents) of The Episcopal Church (the “Church”). The Medical Trust serves only eligible Episcopal employers. The Plans that are self-funded are funded by the Episcopal Church Clergy and Employees’ Benefit Trust, a voluntary employees’ beneficiary association within the meaning of section 501(c)(9) of the Internal Revenue Code.

The Plans are church plans within the meaning of section 3(33) of the Employee Retirement Income Security Act of 1974, as amended, and section 414(e) of the Internal Revenue Code. Not all Plans are available in all areas of the United States or outside the United States, and not all Plans are available on both a self-funded and fully insured basis. Additionally, the Plan may be exempt from federal and state laws that may otherwise apply to health insurance arrangements. The Plans do not cover all healthcare expenses, so members should read the official Plan documents carefully to determine which benefits are covered, as well as any applicable exclusions, limitations, and procedures.

Neither The Church Pension Fund nor any of its affiliates (collectively, “CPG”) is responsible for the content, performance, or security of any website referenced herein that is outside the www.cpg.org domain or that is not otherwise associated with a CPG entity.